

Case Number: CV08 0174

MHP (CPL)

**CERTIFICATE OF FUNDS**  
**IN**  
**PRISONER'S ACCOUNT**

FILED  
JAN 29 2008  
CLERK U.S. DISTRICT COURT  
SANTA CLARA COUNTY, CALIF.

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of Wells, Frank Orlando for the last six months at

[prisoner name]  
Santa Clara County, DOC where (s)he is confined.  
[name of institution]

*[Signature]*

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 0 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 0.

Dated: 1/20/08

*[Signature]*

[Authorized officer of the institution]

*IWF Accountant*

SANTA CLARA COUNTY DOC

## Resident Account Summary

Tuesday, January 22, 2008 @14:02

For PFN: BY0919 WELLS, FRANK ORLANDO

Date	Transaction Description	Amount	Balance	Owed	Held	Reference
01/08/2008	INP	OID:100736702-ComisaryPur	1.85	0.00	3.68	0.00
09/18/2007	INP	OID:100688270-ComisaryPur	1.10	0.00	1.83	0.00
08/30/2007	DEPCA	INITIAL DEPOSIT - REINSTA	0.00	0.00	0.73	0.00
12/06/2005	RELCASH	RELEASE OR CLOSEOUT TRANS	0.00	0.00	0.73	0.00
11/21/2005	<INP>	OID:100418498-ComisaryPur	-0.57	0.00	0.73	0.00
11/21/2005	INP	OID:100418498-ComisaryPur	1.30	0.57	1.30	0.00
11/01/2005	EPR	OID:100409266-ComisaryPur	-21.25	0.57	0.00	0.00
10/25/2005	EPR	OID:100406608-ComisaryPur	-17.65	21.82	0.00	0.00
10/18/2005	EPR	OID:100403292-ComisaryPur	-11.01	39.47	0.00	0.00
10/16/2005	DEPMO	57-39616112	50.00	50.48	0.00	0.00
09/06/2005	EPR	OID:100386443-ComisaryPur	-9.40	0.48	0.00	0.00
08/30/2005	EPR	OID:100383462-ComisaryPur	-30.21	9.88	0.00	0.00
08/26/2005	ERF	OID:100381643-ComisaryRef	38.93	40.09	0.00	0.00
08/24/2005	EPR	OID:100381643-ComisaryPur	-38.93	1.16	0.00	0.00
08/22/2005	<INP>	Payment for INP on 2005-0	-1.30	40.09	0.00	0.00
08/22/2005	<INP>	Payment for INP on 2005-0	-1.30	41.39	1.30	0.00
08/22/2005	<INP>	Payment for INP on 2005-0	-1.30	42.69	2.60	0.00
08/22/2005	<INP>	Payment for INP on 2005-0	-4.00	43.99	3.90	0.00
08/22/2005	<INP>	Payment for INP on 2005-0	-1.30	47.99	7.90	0.00
08/22/2005	<INP>	Payment for INP on 2005-0	-0.71	49.29	9.20	0.00
08/22/2005	DEPMO	57-36172933	50.00	50.00	9.91	0.00
03/23/2005	INP	OID:100318528-ComisaryPur	1.30	0.00	9.91	0.00
03/16/2005	INP	OID:100315360-ComisaryPur	1.30	0.00	8.61	0.00
03/09/2005	INP	OID:100312248-ComisaryPur	1.30	0.00	7.31	0.00
03/02/2005	INP	OID:100309748-ComisaryPur	4.00	0.00	6.01	0.00
02/15/2005	INP	OID:100303728-ComisaryPur	1.30	0.00	2.01	0.00
01/25/2005	<INP>	OID:100295397-ComisaryPur	-0.59	0.00	0.71	0.00
01/25/2005	INP	OID:100295397-ComisaryPur	1.30	0.59	1.30	0.00
01/11/2005	EPR	OID:100289980-ComisaryPur	-9.60	0.59	0.00	0.00
01/01/2005	DEPMO	08-237877379	10.00	10.19	0.00	0.00
12/14/2004	EPR	OID:100280036-ComisaryPur	-4.50	0.19	0.00	0.00
12/08/2004	<INP>	Payment for INP on 2004-1	-1.30	4.69	0.00	0.00
12/08/2004	<INP>	Payment for INP on 2004-1	-2.55	5.99	1.30	0.00
12/08/2004	<INP>	Payment for INP on 2004-1	-1.30	8.54	3.85	0.00
12/08/2004	<INP>	Payment for INP on 2004-1	-1.30	9.84	5.15	0.00
12/08/2004	<INP>	Payment for INP on 2004-1	-2.90	11.14	6.45	0.00
12/08/2004	<INP>	Payment for INP on 2004-1	-2.90	14.04	9.35	0.00
12/08/2004	<INP>	Payment for INP on 2004-0	-3.06	16.94	12.25	0.00
12/08/2004	DEPMO	4544378843	20.00	20.00	15.31	0.00
11/16/2004	INP	OID:100269262-ComisaryPur	1.30	0.00	15.31	0.00
11/09/2004	INP	OID:100266217-ComisaryPur	2.55	0.00	14.01	0.00
11/02/2004	INP	OID:100263785-ComisaryPur	1.30	0.00	11.46	0.00
10/26/2004	INP	OID:100260973-ComisaryPur	1.30	0.00	10.16	0.00
10/19/2004	INP	OID:100258354-ComisaryPur	2.90	0.00	8.86	0.00
10/12/2004	INP	OID:100255509-ComisaryPur	2.90	0.00	5.96	0.00
09/14/2004	<INP>	OID:100244834-ComisaryPur	-0.34	0.00	3.06	0.00
09/14/2004	INP	OID:100244834-ComisaryPur	3.40	0.34	3.40	0.00
09/07/2004	EPR	OID:100242248-ComisaryPur	-2.06	0.34	0.00	0.00
08/31/2004	EPR	OID:100239495-ComisaryPur	-0.56	2.40	0.00	0.00
08/24/2004	EPR	OID:100237217-ComisaryPur	-12.22	2.96	0.00	0.00
08/17/2004	EPR	OID:100234186-ComisaryPur	-28.15	15.18	0.00	0.00
08/10/2004	EPR	OID:100232013-ComisaryPur	-21.01	43.33	0.00	0.00
08/03/2004	EPR	OID:100228962-ComisaryPur	-36.70	64.34	0.00	0.00
07/27/2004	EPR	OID:100226870-ComisaryPur	-16.91	101.04	0.00	0.00
07/20/2004	EPR	OID:100224337-ComisaryPur	-44.19	117.95	0.00	0.00
07/07/2004	EPR	OID:100220320-ComisaryPur	-33.41	162.14	0.00	0.00
07/01/2004	<INP>	Payment for INP on 2004-0	-4.45	195.55	0.00	0.00
07/01/2004	DEPMO	115482350	200.00	200.00	4.45	0.00
06/15/2004	INP	OID:100211682-ComisaryPur	4.45	0.00	4.45	0.00
05/27/2004	DEPCA	INITIAL DEPOSIT	0.00	0.00	0.00	0.00

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8 **UNITED STATES DISTRICT COURT**  
9 **NORTHERN DISTRICT OF CALIFORNIA**

10  
11 Frank G. Walls Plaintiff,

CASE NO. CV 08 0174

12 vs.

13 Santa Clara Valley Sheriff's Office  
14 Supervisor, Santa Clara Dept of  
15 Corrections, Supervisor  
16 John A. Smith Defendant.

**PRISONER'S  
APPLICATION TO PROCEED  
IN FORMA PAUPERIS**

17 I, Frank G. Walls, declare, under penalty of perjury that I am the  
18 plaintiff in the above entitled case and that the information I offer throughout this application  
19 is true and correct. I offer this application in support of my request to proceed without being  
20 required to prepay the full amount of fees, costs or give security. I state that because of my  
21 poverty I am unable to pay the costs of this action or give security, and that I believe that I am  
22 entitled to relief.

23 In support of this application, I provide the following information:

24 1. Are you presently employed? Yes      No ✓

25 If your answer is "yes," state both your gross and net salary or wages per month, and give the  
26 name and address of your employer:

27 Gross: \$ Net: \$

28 Employer: NONE

1 If the answer is "no," state the date of last employment and the amount of the gross and net  
 2 salary and wages per month which you received. (If you are imprisoned, specify the last  
 3 place of employment prior to imprisonment.)

4 1 month ago, I was paid \$100.00 per month.  
 5 Before that, I was paid \$100.00 per month.  
 6 \_\_\_\_\_

7 2. Have you received, within the past twelve (12) months, any money from any of the  
 8 following sources:

- 9 a. Business, Profession or Yes \_\_\_\_ No ✓  
 10 self employment  
 11 b. Income from stocks, bonds, Yes \_\_\_\_ No ✓  
 12 or royalties?  
 13 c. Rent payments? Yes \_\_\_\_ No ✓  
 14 d. Pensions, annuities, or Yes \_\_\_\_ No ✓  
 15 life insurance payments?  
 16 e. Federal or State welfare payments, Yes \_\_\_\_ No ✓  
 17 Social Security or other govern-  
 18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount  
 20 received from each.

21 100.00  
 22 \_\_\_\_\_

23 3. Are you married? Yes \_\_\_\_ No ✓

24 Spouse's Full Name: 100.00

25 Spouse's Place of Employment: 100.00

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ 100.00 Net \$ 100.00

28 4. a. List amount you contribute to your spouse's support: \$ 2

- 1 b. List the persons other than your spouse who are dependent upon you for  
 2 support and indicate how much you contribute toward their support. (NOTE:  
 3 For minor children, list only their initials and ages. DO NOT INCLUDE  
 4 THEIR NAMES.).

5 SW (8) BM (8)

7 5. Do you own or are you buying a home? Yes \_\_\_ No ☒

8 Estimated Market Value: \$ N/A Amount of Mortgage: \$ N/A

9 6. Do you own an automobile? Yes \_\_\_ No ☒

10 Make N/A Year N/A Model N/A

11 Is it financed? Yes \_\_\_ No ☒ If so, Total due: \$ N/A

12 Monthly Payment: \$ N/A

13 7. Do you have a bank account? Yes \_\_\_ No ☒ (Do not include account numbers.)

14 Name(s) and address(es) of bank: N/A

16 Present balance(s): \$ N/A

17 Do you own any cash? Yes \_\_\_ No ☒ Amount: \$ N/A

18 Do you have any other assets? (If "yes," provide a description of each asset and its estimated  
 19 market value.) Yes \_\_\_ No ☒

21 8. What are your monthly expenses?

22 Rent: \$ 0 Utilities: 0

23 Food: \$ 0 Clothing: 0

24 Charge Accounts:

25	<u>Name of Account</u>	<u>Monthly Payment</u>	<u>Total Owed on This Acct.</u>
26	<u>NONE</u>	\$ <u>0</u>	\$ <u>0</u>
27		\$	\$
28		\$	\$

1 9. Do you have any other debts? (List current obligations, indicating amounts and to  
2 whom they are payable. Do not include account numbers.)

3 None

4  
5 10. Does the complaint which you are seeking to file raise claims that have been presented  
6 in other lawsuits? Yes \_\_\_ No ✓

7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in  
8 which they were filed.

9 N/A

10

11 I consent to prison officials withdrawing from my trust account and paying to the court  
12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and  
14 understand that a false statement herein may result in the dismissal of my claims.

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17 DATE

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SIGNATURE OF APPLICANT



UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF CALIFORNIA

ORIGINAL  
JAN 11 2008

MEB  
(PR)

Dear Sir or Madam:

Your complaint has been filed as civil case number

CV 08

0174

✓ A filing fee of \$350.00 is now due. If you are unable to pay the entire filing fee at this time, you must sign and complete this court's Prisoner's In Forma Pauperis Application in its entirety. If the application is granted, you will not have to prepay the fee, but it will be taken out of income to your prisoner account in installments.

Your complaint is deficient because you did not pay the filing fee and:

1. \_\_\_\_ you did not file an In Forma Pauperis Application.

2. ✓ the In Forma Pauperis Application you submitted is insufficient because:

\_\_\_\_ You did not use the correct form. You must submit this court's current Prisoner's In Forma Pauperis Application.

\_\_\_\_ Your In Forma Pauperis Application was not completed in its entirety.

\_\_\_\_ You did not sign your In Forma Pauperis Application.

\_\_\_\_ You did not submit a Certificate of Funds in Prisoner's Account completed and signed by an authorized officer at the prison.

✓ \_\_\_\_ You did not attach a copy of your prisoner trust account statement showing transactions for the last six months.

\_\_\_\_ Other \_\_\_\_\_

Enclosed you will find this court's current Prisoner's In Forma Pauperis Application, which includes a Certificate of Funds in Prisoner's Account form, and a return envelope for your convenience.

**Warning: YOU MUST RESPOND TO THIS NOTICE.** If you do not respond within **THIRTY DAYS** from the filing date stamped above, your action will be **DISMISSED**, the file closed and the entire filing fee will become due immediately. Filing a prisoner's In Forma Pauperis Application will allow the court to determine whether installment payment of the filing fee should be allowed.

Sincerely,  
RICHARD W. WIEKING, Clerk,

By \_\_\_\_\_  
Deputy Clerk

WELLS